

**New Jersey Public Employment Relations Commission**  
**NON-POLICE AND FIRE**  
**COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM**

Line #

**SECTION I: Parties and Term of Contracts**

1	Public Employer:	Borough of Fort Lee	County:	Bergen
2	Employee Organization:	The Borough	Number of Employees in Unit:	12
3	Base Year Contract Term:	1/1/13-12/31/16	New Contract Term:	1/1/17-12/31/21

**SECTION II: Type of Contract Settlement (please check only one)**

4  Contract settled without neutral assistance  
 5  Contract settled with assistance of mediator  
 6  Contract settled with assistance of fact-finder  
 7  Contract settled with assistance of super-conciliator  
 8 If contract was settled in fact-finding, did the fact-finder issue a report with recommendations?  
 Yes  No

**SECTION III: Salary Base**

The salary base is the cost of salaries in the final year of the expired or expiring agreement. This is the base cost from which the parties negotiate the salary increases.

9	Salary Costs in Base Year	\$ 1,410,744.00
10	Longevity Costs in Base Year	\$ 0.00
11	Total Salary Base	\$ 1,410,744.00

**SECTION IV: Salary Increases for Each Year of New Agreement\***

	Year 1	Year 2	Year 3	Year 4	Year 5
12 Effective Date (month/day/year)	1/1/17	1/1/18	1/1/19	1/1/20	1/1/21
13 Cost of Salary Increments (\$)	65,179	29,516	30,108	30,711	31,324
14 Salary Increase Above Increments (\$)	24,000	24,000	24,000	24,000	24,000
15 Longevity Increase (\$)	0	0	0	0	0
16 Total \$ Increase (sum of lines 13-15)	89,179	53,516	54,108	54,711	55,324
17 New Salary Base (\$)	1,499,923	1,553,439	1,607,547	1,662,258	1,717,582
18 Percentage increase over prior year	6.32 %	3.5 %	3.5 %	3.4 %	3.3 %

\*If contract duration is longer than five years, please add an additional page.

## SECTION V: Increases in Other Contractual Economic Items or Newly Added Economic Items\*

19	Item Description	Base Year Cost (\$)	Year 1 Increase (\$)	Year 2 Increase (\$)	Year 3 Increase (\$)	Year 4 Increase (\$)	Year 5 Increase (\$)
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20	Totals(\$):						

\*If contract duration is longer than five years, please add an additional page.

## SECTION VI: Medical Costs

		Base Year	Year 1
21	Health Plan Cost	\$ 172,772.74	\$ 195,061.20
22	Prescription Plan Cost	\$ 51,056.16	\$ 53,506.92
23	Dental Plan Cost	\$ 10,536.00	\$ 10,536.00
24	Vision Plan Cost	\$ 0	\$ 0
25	Total Cost of Insurance	\$ 234,364.90	\$ 259,104.12
26	Employee Insurance Contributions	\$ 81,533.65	\$ 87,833.16
27	Employee Contributions as % of Total Insurance Cost	35 %	34 %

## Section VI: Medical Costs (continued)

28 Identify any insurance changes that were included in this CNA.

N/A

## SECTION VII: Certification and Signature

29 The undersigned certifies that the foregoing figures are true:

Print Name: Matthew Rutch

Position/Title: Chief Financial Officer

Signature:

Date: March 20, 2018

Send this completed and signed form along with an electronic copy of the contract and the signed certification form to: [contracts@perc.state.nj.us](mailto:contracts@perc.state.nj.us)

NJ Public Employment Relations Commission  
Conciliation and Arbitration  
PO Box 429  
Trenton, NJ 08625  
Phone: 609-292-9898

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